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COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My citizenship, residence and post office address are as listed below next to my name.

I believe I am the original, first and [] sole/[X] joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: TRPM-2 Antisense Therapy Using an Oligonucleotide Having 2'-O-(2-Methoxy)ethel Modifications

the spec	cification of which				
(a)[]	is attached hereto.				
	was filed on_Febr on	uary 22, 2002 a	as Application Serial No. 10	0/080794 and was amended	
(c) []		claimed in Interented	national Application No	filed on	
including informat	g the claims, as an tion which is mater	eviewed and und nended by any ar ial to the patenta	mendment referred to above bility of the subject matter of Regulations § 1.56(a).	sure bove identified specification, i. I acknowledge the duty to disclostialized in this application in	se
365(c) of insofar a States of acknowless	of any PCT internate as the subject matter or PCT international ledge the duty to di in the filing date of t	ional application er of each of the I application in th sclose material i	designating the United Stat claims of this application is ne manner provided by the f information as defined in 37	any United States application(s) or es of America, listed below and, not disclosed in the prior United irst paragraph of 35 U.S.C. § 112, I CFR § 1.56 which became availab international filing date of this	ı
PCT/L	JS00/04875	02/25/2000	Pending		
(Application	on Serial No.)	(Filing Date)	(Status)(patented,pending,aband	doned) (Patent No. if applicable)	
09/9	13,325	08/10/2001	Pending		
	on Serial No.)	(Filing Date)	(Status)(patented,pending,aband	doned) (Patent No. if applicable)	
09/9	44,326	08/30/2001	Pending		
	on Serial No.)	(Filing Date)	(Status)(patented,pending,aband	doned) (Patent No. if applicable)	_

Power of Attorney

I hereby appoint Carl Oppedahl, PTO Reg. NO. 32,746 and Marina T. Larson, PTO Reg. No. 32,038 of the firm of OPPEDAHL & LARSON LLP, having office at P.O. Box 5068, Dillon, CO 80435-5068 as attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO:



DIRECT TELEPHONE CALLS TO: OPPEDAHL & LARSON LLP (970)468-6600

PHILET THREWAY OFFICE

Claim f r Priority

I hereby claim foreign priority benefits under 35 U.S.C. § 119 (a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign applications for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

EARLIEST FOREIGN APPLICATION(S), FILED WITHIN TWELVE MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION					
COUNTRY	APPLICATION NO.	DATE OF FILING (day/month/year)	DATE OF ISSUE (day/month/year)	PRIORITY CLAIMED	CERTIFIED COPY ATTACHED
				YES[]NO[]	YES[]NO[]
FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION					
COUNTRY	APPLICATION NO.	DATE OF FILING (day/month/year)	DATE OF ISSUE (day/month/year)		

Prov	isional/	Appl	ication

60/121,726	February 26, 1999	
(application number)	(filing date)	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE	LAST NAME	FIRST NAME	MIDDLE NAME
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[X] Signature for additional joint inventor attached. Numer of Pages _1_

[] Signature by Administrator(trix) or legal representative for deceased or incapacitated inventor. Number of Pages

[] Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR § 1.47. Number of Pages ___.

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